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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF NORTH CAROLINA	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself				
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	About Debtor 2 (Spouse Only in a Joint Case	
1.	Your full name				
	Write the name that is on your government-issued picture identification (for	Jonathan First name	First name	First name	
	example, your driver's	Dontrez			
	license or passport).	Middle name	Middle name	Middle name	
	Bring your picture identification to your	McIver			
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years				
	Include your married or maiden names and any assumed, trade names and doing business as names.				
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6045			

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Debtor 1 Jonathan Dontrez McIver

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Your Employer Identification Number (EIN), if any.	EIN	EIN
5. Where you live			If Debtor 2 lives at a different address:
		1143 Thoroughbred Place NW Concord, NC 28027 Number, Street, City, State & ZIP Code Cabarrus County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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		Document	Page 3 018	
Debtor 1	Jonathan Dontrez McIver			Case number (if known)

ar	Tell the Court About	Your Ba	ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				n of each, see <i>Notice Require</i> of page 1 and check the appro	d by 11 U.S.C. § 342(b) for Individuals opriate box.	Filing for Bankruptcy
	choosing to file under	☐ Ch	napter 7				
		☐ Ch	napter 11				
		☐ Ch	napter 12				
		■ Ch	napter 13				
3.	How you will pay the fee		about how yo	ou may pay. Ty attorney is sub	pically, if you are paying the f	check with the clerk's office in your locate yourself, you may pay with cash, cast behalf, your attorney may pay with a company behalf.	shier's check, or money
					stallments. If you choose this ts (Official Form 103A).	option, sign and attach the Application	for Individuals to Pay
			but is not req applies to you	uired to, waive ur family size a	your fee, and may do so only nd you are unable to pay the	option only if you are filing for Chapter if your income is less than 150% of the fee in installments). If you choose this (Official Form 103B) and file it with you	e official poverty line that option, you must fill out
			то пррпосис	n to nave the	onapier i i iiing i ee wawee	(emolar offir roop) and lie it with you	r peution.
9.	Have you filed for bankruptcy within the	■ No					
	last 8 years?	☐ Ye			\//la a.a		
			District		When When	Case number	
			District District		when When	Case number Case number	
			DISTRICT		willen	Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.				
			Debtor			Relationship to you	
			District		When	Case number, if know	wn
			Debtor			Relationship to you	
			District		When	Case number, if know	wn
11.	Do you rent your residence?	■ No	. Go to I	ine 12.			
	residence:	☐ Ye	s. Has yo	our landlord obt	ained an eviction judgment a	gainst you?	
				No. Go to line	12.		
				Yes. Fill out Ir this bankrupto		ction Judgment Against You (Form 101)	A) and file it as part of

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Deb	otor 1 Jonathan Dontrez	McIver			Case number (if known)			
Par	t 3: Report About Any Bu	usinesses	You Own	as a Sole Propriet	or			
12. Are you a sole proprietor of any full- or part-time business? ■ No. Go			Go to	Part 4.				
		☐ Yes.	Name	and location of bus	iness			
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	e & ZIP Code			
	it to this petition.		Chec	k the appropriate box	x to describe your business:			
				Health Care Busin	less (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Chapter 11 of the do Bankruptcy Code, and		s. If you ir	dicate that you are a ow statement, and fe	court must know whether you are a small business debtor so that it can set appropase a small business debtor, you must attach your most recent balance sheet, statemed ederal income tax return or if any of these documents do not exist, follow the process.	ent of		
	For a definition of small business debtor, see 11		I am r	ot filing under Chap	ter 11.			
	U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankru	ıptcy		
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Cod d under Subchapter V of Chapter 11.	e, and		
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Cod r Subchapter V of Chapter 11.	e, and		
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or Any	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat	☐ Yes.						
	of imminent and	□ 163.	What is	the hazard?				
	identifiable hazard to public health or safety?							
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	Where is the property?				

Number, Street, City, State & Zip Code

Debtor 1 Jonathan Dontrez McIver

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Jonathan Dontr	ez McIver	Document	Page 6 of 8 Case number	(if known)		
Part	6: Answer These Que	stions for F	Reporting Purposes				
	What kind of debts do you have?	16a.			ned in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.	,,,,			
			Yes. Go to line 17.				
		16b.	Are your debts primarily business money for a business or investment				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe that	are not consumer debts or business	s debts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go t	to line 18.			
	Do you estimate that after any exempt property is excluded an	☐ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available		erty is excluded and administrative expenses		
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		□ No				
		ed	☐ Yes				
18.	How many Creditors do	1 -49		1 ,000-5,000	1 25,001-50,000		
	you estimate that you owe?	□ 50-99		□ 5001-10,000	☐ 50,001-100,000		
		☐ 100- ²	100	□ 10,001-25,000	☐ More than100,000		
19.	How much do you	□ \$0 - \$	\$50.000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		001 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion		
	be worth:		,00. 4000,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$	\$50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	□ \$50,		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			,00. 4000,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		□ \$500	,001 - \$1 million	—	- More than too silien		
Part	7: Sign Below						
For	you	I have e	xamined this petition, and I declare un	der penalty of perjury that the inform	nation provided is true and correct.		
			chosen to file under Chapter 7, I am a states Code. I understand the relief ava		under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.		
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I reques	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		bankrup and 357	tcy case can result in fines up to \$250		r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519		
			an Dontrez McIver	Signature of Debtor	2		
		Signatur	re of Debtor 1				

Executed on

MM / DD / YYYY

Executed on July 3, 2025 MM / DD / YYYY

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Debtor 1 Jonathan Dontrez McIver Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David William Hands	Date	July 3, 2025
Signature of Attorney for Debtor		MM / DD / YYYY
David William Hands		
Printed name		
Hands Law Office, PLLC		
Firm name		
3558 N. Davidson Street		
Charlotte, NC 28205		
Number, Street, City, State & ZIP Code		
Contact phone (704) 248-7976	Email address	aperez@handslawonline.com
28560 NC		
Bar number & State		

Jonathan Dontrez McIver 1143 Thoroughbred Place NW Concord, NC 28027 State Employees Credit Union Attn: Bankruptcy 118 South 2nd Street Elkhart, IN 46515

David William Hands Hands Law Office, PLLC 3558 N. Davidson Street Charlotte, NC 28205

Bull City Financial Solutions Attn: Bankruptcy 101 California Street, Suite 500 San Francisco, CA 94111

Fortiva Attn: Bankruptcy Po Box 105555 Atlanta, GA 30348

Internal Revenue Service PO BOX 7346 Philadelphia, PA 19101

Mecklenburg Tax Collections PO BOX 32247 Charlotte, NC 28232

National Credit Systems, Inc. Attn: Bankruptcy P.O. Box 672288 Atlanta, GA 30006

NC Department of Revenue PO BOX 1168 Raleigh, NC 27602

Pinnacle Financial Partners Attn: Bankruptcy 21 Platform Way S. Suite 2300 Nashville, TN 37203